

POSITION	INIT.	DATE
CLASSIFIER	12	10/19/92
EXAMINER	313	10-20-9
TYPIST	337	1-12-9
VERIFIER	233	1-12-95
CORPS CORR.		
SPEC. HAND	14011-	1-11-93
FILE MAINT.	143	10/22/92

# INDEX OF CLAIMS

Claim	Date
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SYMBOLS  
 - Rejected  
 + Allowed  
 \* (Through name)  
 + Rejected  
 + Non-elected  
 + Interference  
 A Appeal  
 O Objected

Claim	Date
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Priority claims  
conditions

PARTS OF APPLIC  
FILED SEPARATELY

NOTICE OF ALLOW

ISSUE

Amount Due

Label  
Area